

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge				
<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled	<input type="checkbox"/> Other						

Work Order ID 96107

96107

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Item ID: D412-702-069 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Grommet
 Start Date: 1/21/13 Start Qty: 4.00 *4* Cust Item ID:
 Required Date: 1/24/13 Req'd Qty: 4.00 *4* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	Packaging	0.00							
120									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D412-702-069								
	Location: _____								
	PPP Rev: <u>PPP 100 717</u>								
130	QC21- Final Inspection - Work Order Release	0.00							
130									
QC	Memo	0.00							
Quality Control									

13/4/30 (1)

13/5/30

MC 5 13-04-30

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Picklist Print

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Page 1

Work Order ID: 96107

Parent Item: D412-702-069

Parent Item Name: Grommet

Start Date: 1/21/13

Required Date: 1/24/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP rev A 07.05.11 new issue EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3619-2 Grommet		Manufactured	No			110	Each	1.0000	1				
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST060		1							
				86312		1							

86312

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